

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		097429	
FORMALITY REVIEW	<i>[Signature]</i>		11/23/99

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
"	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
+	Restricted	O	Objected

Claim		Date
Final	Original	
1	10-25-0	
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Claim		Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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